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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/803,166
	Filing Date	03/09/2001
	First Named Inventor	Tomas Roztocil
	Art Unit	2622
	Examiner Name	Twylar Marie Lamb
	Attorney Docket Number	10432-44

I hereby revoke all previous powers of attorney given in the above-identified application.

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☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Mark G. Bocchetti</i>		
Name	Mark G. Bocchetti		
Date	<i>2/15/05</i>	Telephone	<i>585-477-3395</i>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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